1FU 2812



PATENT Docket No. 20063/OG03-047

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby certify that this paper is Applicant(s): HAN being deposited with the United States Postal Service with sufficient postage as first class Serial No.: 10/750,252 mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-Filed: December 31, 2003 1450 on this date: July 26, 2005 For: "Methods for Fabricating Non-Volatile Memory Devices" Group Art Unit: 2812 James A. Flight Registration No. 37,622 Attorney for Applicant(s) Examiner: Richard A. Booth

AMENDMENT TRANSMITTAL WITH PETITION FOR EXTENSION OF TIME

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is a response to the Office action pending in the above application.

08/02/2005 YPOLITE1 00000004 10750252

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450.00 OP

 Small Entity Stat 	tus	Stat	Entity S	Small	1.
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	Verified statement(s) claiming small entity status is(are) attached
	Small entity status has been established and is still effective.
\boxtimes	Has not been established.

2. Extension of Time

This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

EXTENSION (Months)	FEE FOR LARGE ENTITY		FEE FOR SMALL ENTITY		
One Month		\$120.00		\$60.00	
Two Months	X	\$450.00		\$225.00	
Three Months		\$1020.00	0 - 1 1	\$510.00	
Four Months		\$1,590.00		\$795.00	
Fifth Month		\$2,160.00		\$1,080.00	

If an additional Extension of Time is required, please consider this a petition therefor.

Extension Fee: \$450.00

An extension for month(s) has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Deduction: \$0.00

Extension Fee Due With This Request \$450.00

3. Fee for Claims

☐ The fee for additional claims [(37 CFR 1.16(b)-(d)] has been calculated as shown below:

				SMAL	L ENTITY		ER THAN A LL ENTITY	
	Claims Remaining After Amendment	Highest No. Previously Paid For		Present Extra	Rate	Additional Fee	Rate	Additional Fee
TOTAL	9	MINUS	20	= 0	x25=	\$	x50=	\$0
INDEP.	2	MINUS	3	= 0	x100=	\$	x200=	\$0
First Presentation of Multiple Dependent Claim			+180=	\$	+360=	\$0		
TOTAL A	DDITIONAL	FEE				\$	OR	\$0

4. Method of Payment of Fees

\square	Attached is a check in the amount of (for extension of time):	\$450
	Charge Deposit Account No. 50-2455 in the amount of:	\$
	A copy of this Transmittal is enclosed.	

5. Deposit Account and Refund Authorization

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-2455. A copy of this Transmittal is enclosed.

Please refund any overpayment to Hanley, Flight & Zimmerman, LLC at the address below.

Respectfully submitted,

HANLEY, FLIGHT & ZIMMERMAN, LLC USPTO Customer Number 34431 20 North Wacker Drive Suite 4220

Chicago, Illinois 60606

(312) 5/80-1020

By:

ames A. Flight

Registration No.: 37,622

July 26, 2005